Taylor Exhibit F

Travel Expenses (Depositions, Hearings, Trial)

Must be completed by the employee	oyee and verified and	ou	RIOGRANDE LEGAL DWN TRAVEL EXPE ry Branch Manager w	NSE FORM	working days after expense was	a incurred.	/
Name: Jose Garza Destination Corpus Christ Purpose of Trip: Court Hearing		<u></u>		Office File Nur	San Antonio	VID 0	2 /01
Departed from: X Returned to: X	Home	Office Office	Time of Departure: Time of Return;	6:00 a.m, 6:00 p.m.		ate 2/11/1/ ate 2/12/1	4
Personal Automobile Use Date 2/11/14 Date 2/12/14 Date	Beginning	San Antonic Corpus Chri	14958		15110 Odometer #	Miles Driver 152	_
Air Fare "Receipts required"	DEPARTURE DATE	TIME	FROM	то	ARRIVAL DATE	TIME	ĺ
Meal Allowance:	Did TRLA pa	y airfare in a		02/11/14 02/12/14	Total Air Fare Expense wing YES	\$0.0	99999
Lodging Allowance: "*Receipts required**	DATE(S)	# 01)	Vights		Total Meal Expense		o /
	2/11/14	*017	1 Nigh Nigh Nigh Nigh Nigh Nigh	t&Tax	Amt Per Day \$114.	95 \$114.99 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$114.99	
Other Expenses: "Receipts required"	EXPENSES Cab Fare Car Rental Shuttle Parking Tips & Incidentals (Explain)			Date	of Other Expenses	Cost	
Amount Claimed: \$ ADVANCE RECEIVED: \$ Advance Check Number: Advanced Airfare: \$	312.38 0.00 0.00		FEB 2.7	2014	Grand Total Amount Due Traveler: \$ Amount Due TRLA: \$	712.38	0/8/
Employee Signature FOR ACCOUNTING USE ONLY Account No: Account No:		ols claimed a			nsors Signature DECEI	Date	

Emerald Beach Hotel

02-12-14

N/A Jose Garza 7414 Robin Rest Dr. san antonio TX 78209 US

Guest Signature: _

Folio No. A/R Number Group Code Company Invoice No.

Reference No.

Room No. : Arrival Departure : 02-12-14

0617 : 02-11-14

Conf. No

: 2452953

Page No. : 1 of 1

Rate Code : IGBAR

Date		Description		Charges	Credits
02-11-14	*Room			99.95	
02-11-14	State Hotel Tax			6.00	
02-11-14	City Hotel Tax			9.00	
			Total	114.95	0.00
			Balance	(114.95	

(Owned by Shoreline Hotel Venture LP and Operated by Kirby Hotel Management Co)

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

> **Emerald Beach Hotel** 1102 S. Shoreline Blvd Corpus Christi, TX 78401 Telephone: (361) 883-5731 Fax: (361) 883-9079

· 116+		TEXAS RIOGRANDE I	LEGAL AID, INC LEXPENSE FO				1
* Must be completed by the emplo	oyee and verified and	approved by Branch Man	ager within fiftee	in (15) working days	s after expense was incur	red.	
	ti TX- US Court rence Hearing			Office Brown	sville	VID07	اور
Departed from: Returned to:		Office Time of Depa Office Time of Retu		1:00 PM] 4:30 PM]	Date Date	2/11/14 2/12/14	
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Date ;	Beginning From:		Ending To:		Odometer #'s	194	
Date !	Beginning i From: i	. 54	Ending To:		Odometer #'s	0	/
Air Fare	<u>Beginning</u> i		Ending	Miles are paid at \$0 Total Allowand	Odometer #'s 0.45 To ce for Personal Automo	i 0 i 388 bile Use \$174.60	
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Meal Allowance:	bio 1 Nos pa	y amare in advance, piess	e place an A in	nte rollowing	1691	NO]	
modi / iliowanog.		DATE(S) of Trip	02/11/14	<u></u>		Cost	
			02/12/14	over the late.	Water to E	\$30.00 \$30.00	
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		· · · · · · · · · · · · · · · · · · ·		h . Think	W	\$0.00 \$0.00	
Ladeline Allemanie		•		- То	otal Meal Expenses	\$60.00	$\sqrt{}$
Lodging Allowance: **Receipts required**	DATE(S)	# of Nights		Amt	Per Day	Cost	
		17	Night&Tax Night&Tax			\$0.00 \$0.00	
			Night&Tax Night&Tax			\$0,00 \$0.00	
			Night&Tax Night&Tax			\$0.00	
	22		Night&Tax			\$0.00 \$0.00	
	300		NightaTax	Total Lodgi	ing Expenses	\$0.00 \$0.00	
Other Expenses: "Receipts required"	EXPENSES I		·····	Date			
	Cab Fare			Data		Cost	
	Car Rental Shuttle		197				
	Parking						
	Tips & Incidentals						
	(Explain)	· · · · · · · · · · · · · · · · · · ·		Total of Other	Expenses	\$0.00	
Amount Claimed: \$	234.60		2 B 7)	Grand Total \$	234.60	
ADVANCE RECEIVED: \$ Advance Check Number: Advanced Airfare: \$	0.00	ray sen	2 7 2014	Amor	unt Due Traveler : \$	234.60	
Certify that this statement the app	chments and amoun	. 1			or the amount claimed ha	s not been received.	
Employee Signature	<u> </u>	Date	Primar	Supervisor Signs	alure .	Date	
FOR ACCOUNTING USE ONLY		·			DECEIV	/En	
Account No: 5445	12-00-01		·	ccount No:			
Account No:			<u> </u>	ccount No:	<u>WL FEB 2-1-20</u>	<u> </u>	

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+ A1	008	e 9		OGRANDE LI WN TRAVEL					
Must be completed with the compl	Robert Lovas	Dogga		Branch Mana		Office File Number	Austin		_
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Date	e	From: Beginning			To Endin	:	Odometer #'s		_
Air Fare						Miles are p		otal Miles So.00	734 ~1
**Receipts require	ed"	OEPARTURE DATE	TIME	FROM		то	ARRIVAL DATE	TIME	
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	00						Total Air Fare Expense		‡
		Did TRLA pay	airfare in adv	vance, please	place an X i	the following		NO	_
÷						****	30 Total Meal Expenses	\$0.0 \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 \$0.0	
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		s & incidentals							_
	1	(Explain)				(Total of	Other Expenses		
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certify that this sta		nents and amount	s claimed are	true, correct,		e and that pay	ment for the amount claimed h	as not been received.	
FOR ACCOUNTING	G LISE ONL	48-01	01			Account No:	Pece	iven	
Account No:						Account No:	M MAR - 1	2011	

TEXA	S RIOGRANDE LEGAL AID), INC
Of	TOWN TRAVEL EXPENS	E FORM

ne: Jose Garza	4			Office	San Antonio	
ination Corpt	us Christi lo Edini	burg, then to Wes	aco	File Number		VID07
ose of Trip: Court	hearing in Corpu	us, meeting with E	xpert in Edinburg and mee	iting in Weslaco		
arted from: X	Home Home	Office		6:00 a.m. 6:30 p.m.	Date	3/4/14 3/6/14
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опаl Automobile Use 12 Date 3	3 /4/14	From: San A	votenia	To: Corpus, Ed	inahum Wesis	Miles Driven
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are						Miles 694 9 Use \$267,12
are Ceipts required**	DEP/	ARTURE I			ARRIVAL	ٔ باد
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		and the same of the same			Total Air Fare Expense	
	D	NO TRLA pay airfa	re in advance, please plac	e an X in the following	YES	NO
Allowance:		•		. 10		
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			0 m	03/06/14		\$30.00
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9				30 St. 50 St.		\$0.00
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ging Allowance:						
eceipts required**	DA	ITE(S)	# of Nights		Amt Per Day	Cost
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	Cab Fare Car Rent Shuttle Parking Tips & In	e ital ncidentals	Nigi Nigi Nigi Nigi	niš Tax niš Tax niš Tax niš Tax niš Tax Tota	al Lodging Expenses	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$254.26
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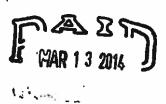
30 03-05-14

Folio No. Jose Garza Room No. : 809 7414 ROBIN REST DR A/R Number Arrival 03-04-14 Corpus Christi Tx **Group Code** Departure : 03-05-14 San Antonio TX 78209 Company Conf. No. : : Lesiure 65992169 **United States** Membership No.: Rate Code: IDAAA Invoice No. Page No. : 1 of 1

Date	Description	Charges Credits
03-04-14	*Accommodation	139.00
03-04-14	State Occupancy Tax	8.34
03-04-14	City Occupancy Tax	12.51
03-04-14	Parking	10.00
03-05-14	American Express	Total 169.85 169.85
		Balance 0.00

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my flablity for this bill is not walved and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



Holiday Inn Marina 707 North Shoreline Boulevard Corpus Christi, TX 78401 Telephone: 361-882-1700 Fax:361-882-3113



105

03-06-14

112

Jose Garza 7414 Robin Rest Dr San-Antonio TX 78209-3134 **United States**

Folio No. A/R Number **Group Code**

: TEXAS RIO GRANDE LEGAL AID

Arrival 03-05-14 : Departure : 03-06-14 Conf. No. : 66874843

Invoice No.

Company

Membership No.: PC 966822935

Rate Code: IDOTH Page No. : 1 of 1

Room No. :

Date	Description		Charges	Credits
03-05-14	*Accommodation		74.70	
03-05-14	State Tax - Room		4.48	
03-05-14	City Tax - Room		5.23	
03-06-14	American Express			84.41
	XXXXXXXXXXX3002			
automatica	for staying at the Holiday inn Express Weslaco . Qualifying points for this stay will lly be credited to your account. To make additional reservations online, update	Total	84.41	84.41
	int information or view your statement please visit www. priorityclub.com. We do welcoming you back soon.	Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Independently Owned and Operated by RGV Express Limited

Holiday Inn Express Weslaco Hotel and Suites 421 S. International Blvd. Weslaco, TX 78596 Telephone: (956) 973-2222 Fax: (956) 968-9222

TOWN TRAVEL EXPENSE FORM Must be completed by the employee and verified and approved by Branch Manager within fifteen (15) working days after expense was incurred, JOSE GARZA Office **SAN ANTONIO** Name: CORPUS CHRISTI VIDQ7 Destination File Number For Court hearing and client interview. Purpose of Trip: Office Departed from: Home Time of Departure: 6:00 a.m. Date 3/31/14 Returned to: Home Office Time of Return: 7:30 p.m. Date 4/1/14 Personal Automobile Use Miles Driven Date 3/31/14 From: San Antonio To: Corpus Christi Beginning 16222 Ending 16371 Odometer #'s 149 Date 4/1/14 Corpus Christi From: To: Beginning 16371 Ending 16530 Odometer #'s 159 Date From: To: Beginning Ending Odometer #'s **Date** From: To: Beginning **Ending** Odometer #'s Miles are paid at \$0.45 **Total Miles** 308 Total Allowance for Personal Automobile Use \$138.60 Air Fare "Receipts required" DEPARTURE ARRIVAL TIME **FROM** TO TIME DATE DATE Total Air Fare Expense Did TRLA pay airfare in advance, please place an X in the following YES Meal Allowance: DATE(S) of Trip Cost 03/31/14 \$30.00 04/01/14 \$30.00 20.00 \$0.00 \$0.00 \$0.00 \$0.00 30.00 Total Meal Expenses \$60.00 Lodging Allowance: "Receipts required" # of Nights Aml Per Day Night& Tax \$126.55 \$126.55 Night&Tax \$0.00 Night&Tax \$0.00 Night& Tax \$0.00 Night& Tax \$0.00 Night&Tax 50.00 Night&Tax 30.00 Night&Tax 50.00 Total Lodging Expenses \$126.55 Other Expenses: **Receipts required** EXPENSES Date Cost Cab Fare Car Rental Shuttle Parking Tips & Incidentals (Explain) Total of Other Expenses \$0.00 **Grand Total \$** 325.15 Amount Claimed: \$ 325.15 Amount Due Traveler: \$ 325.15 ADVANCE RECEIVED: \$ 0.00 Amount Due TRLA: \$ Advance Check Number: Advanced Airfare: \$ 0.00 ee Signature Primary Supervisor's Signature

I certify that this statement, the attachments and amounts claimed are true, correct, and complete and that payment for the amount claimed has not been received. FOR ACCOUNTING USE ONLY Account No:_ Account No: Account No:_ Account No:



04-01-14

Room No. : 516 Jose Garza Folio No. 7414 Robin Rest Dr. Arrival : 03-31-14 A/R Number San Antonio Tx Departure : 04-01-14 **Group Code SAN ANTONIO TX 78209** : LEISURE Conf. No. : 64818633 Company **United States** Rate Code: Membership No.: **IMGOV** Invoice No. Page No. : 1 of 1

Date		Description	Charges Credits
03-31-14	*Accommodation		97.00
03-31-14	State Occupancy Tax		5.82
03-31-14	City Occupancy Tax		8.73
03-31-14	Valet Parking		15.00
03-31-14	American Express		126.55
			Total (126.55) 126.55
			Balance 0.00

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



1 4 martin minutes at 1 m

DECEIVE APR 1 0 2014

Holiday Inn Marina
707 North Shoreline Boulevard
Corpus Christi, TX 78401
Telephone: 361-882-1700 Fax:361-882-3113

Employee Signature

Date

Primary Supervisor's Signature

FOR ACCOUNTING USE ONLY

Account No:

Account No:

Account No:

Account No:

ille .

na: Marinda va	n Dalen					Office	Brownsville	•
tination Corp	us Christi TX- US					File Number	DI CHILLO VALIG	VIDO
ose of Trip: Statu	s Conference Hea	ring				1671		
arted.from: x	Home		Office	Time of Departure:			Date	5/14/1
ed to:	Home		Office	Time of Return:			Date	5/15/1
al Automobile I les								
nal Automobile Use Date 5/		From:	Brownsvill	e e	To:	Corpus Chris	att TX	Miles Drive
		Beginning			Ending		Odometer #'s	165
Date	4445/15/14		Corpus Cl	ıristi TX		Brownsville		
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							Total Air Fare Expense	
	Die	TRLA pa	y airfare in	advance, please place	an X in	the following	YES	NO.
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		d.					n p -	\$0.0
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	· ·	- ', '					Total Midal Expellada	\$30.0
ng Allowance: eipts required**	C DAT	E/85	9 154	(News)		·		
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	* :				&Tax			\$0.0
	185				&Tax &Tax			\$0.0
					ATax			\$0.0 \$0.0
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	<u> </u>	73		Night	&Tax	Total	Lodging Expenses	\$0.0
xpenses:					,	IOM	Loading Exbenses	\$90.8
elpts required**	EXPE	VSES				Date		Cost
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	Shuttle	<u>"</u>				7		
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			1	MAY 2 n 2011	- 11	Total of C	ther Expenses	\$0.0
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							Grand Total \$	269.3
Amount Cla		269.35	0.00				Amount Due Traveler : \$	200 0
ADVANCE RECE	VED: \$	0.00	9 16		•		Amount Due TRLA: \$	269.3
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ee Signature	<u> </u>		- C-	1011	7 2			
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COUNTING USE	ONLY						. necei	♥₽∭
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SUPER 8 CORPUS CHRISTI

411 N. SHORELINE BLVD. CORPUS CHRISTI, TX 78401 US Phone: (361) 884-4815

Fax: (361) 884-3111 Email: super8bf@yahoo.com Printed: 5/15/2014 7:36:34 AM

Folio (Detailed)

Name:

VANDALEN, MARINDA O

Confirmation Number:

16692450

Account Number:

987-610779

Address:

207 E WASHINGTON ST

BROWNSVILLE, TX 78520 US

Room:

206

Room Type:

NQ1, 1 QUEEN NSMK

Nights:

1

Guests: 1/0

Rate Plan: Arrival:

RACK

Daily Rate: Departure:

\$79.00 + \$11.85 Tax 5/15/2014 (Thu)

GTD:

VI - VIŞA

XXXX XXXX XXXX 8272

Room Rate:

5/14/2014 (Wed) - 5/14/2014 (Wed)

5/14/2014 (Wed)

\$79.00 + \$11.85 Tax per night.

Date	Code	Description	Amount	Balance
5/14/2014	RM	ROOM CHARGE	\$79.00	\$79.00
5/14/2014	TAX1	STATE TAX	\$4.74	\$83 <u>.74</u>
5/14/2014	TAX2	CITY TAX	\$7.11	\$90.85
5/15/2014	VI	VISA	(\$90.85)	\$0.00
		XXXX XXXX XXXX 8272	•	·

Summary	·					
Room	Tax	F&B	Other	CC	Cash	DB
\$79.00 	\$11.85 	\$0.00 	\$0.00	(\$90.85)	\$0.00	\$0.00

By signing below, I agree to these terms and conditions.

Guest Signature:

[&]quot;We or our affiliates may contact you about goods and services unless you call 888-946-4283 or write to Opt Out/Privacy, Wyndham Hotel Group, LLC, 22 Sylvan Way, Parsippany, NJ 07054 to opt out. View our website about privacy."



⁽¹⁾ Regardless of charge instructions, the undersigned acknowledges the above as personal indebtedness. (2) This property is privately owned and management reserves the right to refuse services to any one, and will not be responsible for injury or accidents to guests or loss of money, jewelry or any personal valuables of any kind.

TEXAS RIOGRANDE LEGAL AID, INC. OWN TRAVEL EXPENSE FORM Must be completed by the employee and verified and approved by Branch Manager within lifteen (15) working days after expense was incurred. Brownsville Name: Marinda van Dalen Office VID97 Destination Corpus Christi File Number Depo perp meeting & Depo of Lenard Taylor Purpose of Trip:]Home 9:30 Departed from: Office Time of Departure: Date 7/17/141 Returned to: Office Time of Return: 6:30 PM 7/18/14 Home Date Miles Driven Personal Automobile Use Date From: [To: [Beginning Ending ! Odometer #'s Date From: To: Beginning Ending Odometer #'s From: To: **Ending** Odometer #'s Beginning From: To: Beginning **Ending** Odometer #'s Miles are paid at \$0.45 **Total Miles** Total Allowance for Personal Automobile Use \$0.00 Air Fare ""Receipts required" DEPARTURE ARRIVAL TIME **FROM** TO TIME DATE DATE Total Air Fare Expense Did TRLA pay airfare in advance, please place an X in the following YES NOI Meal Allowance: DATE(S) of Trip Cost 07/17/14 \$30.00 07/18/14 \$30.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 2 8 2014 \$0.00 Total Meal Expenses \$60.00 Lodging Allowance: **Receipts required** # of Nights DATE(S) Amt Per Day 7/17/14 Night&Tax \$87.74 \$67.74 Night&Tax \$0.00 Night&Tax Night&Tax \$0.00 \$0.00 Night& Tax \$0.00 Night&Tax Night&Tax \$0.00 \$0,00 Night&Tax \$0.00 Total Lodging Expenses \$87.74 Other Expenses: ""Receipts required"" EXPENSES Date Cost Cab Fare Car Renta Shuttle Parking \$8.50 Tipa & Incidentals Gasoline \$46.98 (Explain) **Total of Other Expenses** \$53.48 **Grand Total \$** 201.22 Amount Claimed: \$ 201.22 Amount Due Traveler: \$ 201,22 **ADVANCE RECEIVED: \$** 0.00 Amount Due TRLA: \$ Advance Check Number: Advanced Airfare: \$ the attachments and amounts claimed are true, correct, and complete and that payment for the amount claimed has not been received. Date Primary Supervisor's Signature Date FOR ACCOUNTING USE ONLY Account No:

Account No:

Account No:_

8FCSXV	8FC5Z4	8FBYW2	8F0CVM	8DYLRF	acrc4L	aC.YUXZ	W8H5	8C6CJF	8C0DJK	8BBBRM	8BB02Z	89YJLC	89WYK0	89LKC7	146642918	146630121	146417721	146326600	Jing Nu	Contract	Enterpris	Rental Agreement #	ge 15 of 33 For Billin (866) 277 ARINQUI Fed Tax	PO BOX
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REED, MARY CHRISTING	DONALDSON, SARAH	FLORES, FABIOLA	GUERRA, MONICA	BONE, POLLY	GARZA, PAULA	MEDINA, VERONICA	O'ROURKE, ERIN	RIOJAS, JAVIER	DOGGETT, ROBERT	RIOJAS, JAVIER	RAMOS, ROMAN	VAN DALEN, MARINDA	DOGGETT, ROBERT	BELTRAN, MARIA	WYATT, MICHAEL	CARRASCO, RAFAEL.	NORIEGA, RAUL	JONAS, STACIE			1	Rente	Alamo Onterpriso National	
AUSTIN. TX	SAN ANTONIO, TX	AUSTIN, TX	SAN ANTONIO, TX	SAN ANTONIO, TX	BROWNSVILLE, TX	SAN ANTONIO, TX	NASHVILLE, TN	EAGLE PASS, TX	AUSTIN, TX	EAGLE PASS, TX	LAREDO, TX	BROWNSVILLE, TX	AUSTIN, TX	NASHVILLE, TN	SAN ANTONIO, TX	SAN ANTONIO, TX	HARLINGEN, TX	NEWARK, NJ				Rental Cocation	Charles Be william	TEXAS RIO GRANDE LEGAL AID
09/11/14	09/11/14	09/11/14	09/09/14	09/09/14	09/04/14	09/04/14	09/04/14	09/02/14	08/30/14	08/27/14	08/27/14	08/26/14	08/26/14	08/25/14	09/19/14	09/19/14	09/10/14	09/07/14				Rental Date	. #: 3331017 . Date: 20-Sep	DE LEGAL
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74 72	37.36	37.36	177.05	74.73	134.62	74.37	262.64	91,81	411.76	76.85	429.77	484.00	75.28	97.45	46.69	80.87	81.90	154.68				Amount Due		



(866) 278-9894 ARINQUIRY@EHI.COM	EHI.COM			A	Alamo Interprise Netional	Consolidated Inv	v. #: 3331017		
Fed Tax Id: 430724835	0724835					Consolidated Inv. #: 3331017 Consolidated Inv. Date: 20-Sep-2014	/. #: 3331017 /. Date: 20-Sep-	2014	
Rental Agreement #	Bill Ref#	External Customer Ref#	ustomer #	Reservation Number	Renter	Rental Location	Rental Date	Return Date	Amount Due
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яFK72Y	900004923225	1948-47210)	82-59724 TNYRYH	TNYRYH	WELCH, STEPHANIE	EL PASO, TX	09/11/14	09/12/14	53.05
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8GDYRK	500004963618	12121-18h		JQCRFS	GARZA, ROBERT	AUSTIN, TX	09/16/14	09/19/14	175.21
K10265D TEXAS	RIO GRANDE LEG	K10265D TEXAS RIO GRANDE LEGAL AID - Billing Number 863927	ber 863927			Grand Total in USD			3,174.52
Enterprise Rent	A Car Grand Tota	Enterprise Rent A Car Grand Total For Account Number TEXAS RIO GRANDE LEGAL AID in USD	per TEXAS RIC	GRANDE LEG/	AL AID in USD				3,174.52

EAN SERVICES, LLC PO BOX 840173 KANSAS CITY, MO 64184-0173

ENTERPRISEHOLDINGS

TEXAS RIO GRANDE LEGAL AID Rental Summary







Fed Tax Id: 430724835

Document 1206-6 File on the Page 17 of 3331017 Rental Agreeme

> Bill Ref# Invoice Date

8CYC4L 650004379263 20-Sep-2014

Bill To Information

TEXAS RIO GRANDE LEGAL AID

300 S TEXAS

WESLACO, TX - 78496

Rental Information

Reservation Number: 8CQVHD

Driver: GARZA, PAULA

Additional Driver: NORIEGA, PRISCILLA Pickup Date/Time: 09/04/2014 14:54 Return Date/Time: 09/05/2014 18:01

Miles/kms: 348

Car Class: MVAR

Requested Class: MVAR

Vehicle Information Yr/Make/Model VIN License No Beg/End/Distance 2014/DODGE/GCA ER127855 CGZ7114 34981/35329/348 **Rental Branch**

BROWNSVILLE HWY 77 4177 EXPRESSWAY 83 BROWNSVILLE, TX - 78520

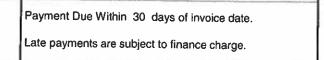
Return Branch

BROWNSVILLE HWY 77 4177 EXPRESSWAY 83 **BROWNSVILLE, TX-78520**

Charge Detail		The State of the S		
Description TIME & DISTANCE	Qty 1	Period DAY	Rate 60.00	Amount 60.00
TIME & DISTANCE	3	HOUR	19.80	59.40
		Sub ⁻	Total	119.40
10% TEXAS MOTOR VEHICLE TAX		PERCENT	10.00	12.24
TEXAS REIMBURSEMENT FEE -DAILY	2	DAY	1.49	2.98
	Total Charges	(USD)		134.62



Remit Payment in USD to	For Billing Inquiries	Payment Terms
EAN SERVICES, LLC PO BOX 840173 KANSAS CITY, MO 64184-0173	Tel#:(866) 278-9894 ARINQUIRY@EHI.COM	Payment Due Within 30 days of invoice date. Late payments are subject to finance charge.





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ination ose of Trip:	Corpus Christi 1≠ Trial 43*	94	THE WAY	是"不是"的"是"。 "你是我们,你可以你们,	TANKS THE COLUMN	IN TALEMEN CO	VID07
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* Lodging for Marinda. Robert Doggett. Expert and

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OMNI ME HOTELS & RESORTS

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900 North Shoreline Blvd. Corpus Christi, TX 78401

Phone: 361-887-1600 • Fax: 361-887-6715 Reservations: 800-843-6664

VANDALEN, MARINDA TEXAS RIOGRANDE LEGAL AID

531 East St. Francis

Brownsville, TX 78520 US

VALUALEN, MARNELA E XELLIAO BANDETE E LE LIST SELELADOS Room Number: 1625

Daily Rate: 115.00

Room Type: DDNB No. of Guests: 1 / 0

ARRIVAL	DEPARTUR	RE CREDIT CARD	RATE PLAN	CATEGORY	ACC	OUNT
09/01/14	09/02/14	XXXXXXXXXXXXXXX8272	CBEND	ESP	14501	1752543
DATE	ROOM NÓ.	DESCRIPTION	REFERENCE			AMOUNT
09/01/14	1625	LONG DISTANCE	1625/22:04/10/5182816677	· * 1 =		\$25.06
09/01/14	1625	ROOM CHARGE	#1625 VANDALEN, MARINDA	A Links	13	\$115.00
09/01/14	1625	CITY OCC TAX - 9%	CITY OCC TAX - 9%	_	NT.	\$10.35
09/02/14	1625	VISA	VISA	-6711	1	(\$150.41)
09/02/14	1625	ADJ - LOCAL CALL	ADJ - LOCAL CALL			(\$25.06)
09/02/14	1625	VISA	CORRECTION		ř	\$25.06

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TOTAL DUE:

\$0.00

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VANDALEN, MARINDA

Room Number: 1042

Daily Rate: 115.00

Room Type: DDNB

531 East St. Francis Brownsville, TX 78520 US

No. of Guests: 1/0

ARRIVAL	DEPARTU	RE CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT
09/03/14	09/04/14	XXXXXXXXXXXXXX8272	CBEND	ESP	14501783839
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT
09/03/14	1042	WIFI INTERNET ACCESS	1042/1/15:25/WIFI INTERNET	ACCESS	\$9.95
09/03/14	1042	TOPSIDER LOUNGE	1042/3306/20:18/TOPSIDER	LOUNGE	\$64.67
09/03/14	1042	ROOM CHARGE	#1042 VANDALEN, MARINDA	A., W. 87	\$115.00
09/03/14	1042	CITY OCC TAX - 9%	CITY OCC TAX - 9%	5.7	\$10.35
09/04/14	1042	VISA	VISA		(\$206.87)) _{1 (ic}
09/06/14	1042	VISA	CV8272 CREDIT		\$6.90

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CREDIT DUE:

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Reservations: 800-843-6664

VANDALEN, MARINDA TEXAS RIOGRANDE LEGAL AID 300 S TEXAS BLVD WESLACO, TX 78520 US Room Number: 656

Daily Rate: 115.00 Room Type: DDNB

No. of Guests: 1/0

ARRIVAL	DEPARTU	RE ČREDIT CARD	RÂTE PLAN	CATEGORY	ACCOUNT
09/03/14	09/05/14	XXXXXXXXXXXXXX8272	BAR7	BAR7	14501784933
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT
09/04/14	656	ROOM CHARGE	#656 VANDALEN, MARINDA		\$115.00
09/04/14	656	CITY OCC TAX - 9%	CITY OCC TAX - 9%	N	\$10.35
09/05/14	656	VISA	VISA		(\$132.25)
09/06/14	656	VISA	CV8272 CREDIT	A 7	\$6.90
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CREDIT DUE: (\$0.00)

Page 1 of 1

MNI W HOTELS & RESORTS

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Reservations: 800-843-6664

VANDALEN, MARINDA

TEXAS RIOGRANDE LEGAL AID

531 East St. Francis

Brownsville, TX 78520 US

Room Number: 1044

Daily Rate: 115.00

Room Type: DDNB

No. of Guests: 1/0

ARRIVAL	DEPARTUR	RE CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT
09/01/14	09/05/14	XXXXXXXXXXXXX8272	CBEND	ESP	14501752544
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT
09/01/14	1044	TOPSIDER LOUNGE	1044/3201/21:46/TOPSIDER LO	UNGE	\$41.66
09/01/14	1044	ROOM CHARGE	#1044 VANDALEN, MARINDA		\$115.00
09/01/14	1044	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$10.35
09/02/14	1044	TOPSIDER LOUNGE	1044/3256/23:34/TOPSIDER LO	UNGE	\$33.5 4~
09/02/14	1044	ROOM CHARGE	#1044 VANDALEN, MARINDA		\$115.00
09/02/14	1044	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$10.35
09/03/14	1044	TOPSIDER LOUNGE	1044/3274/13:12/TOPSIDER LO	UNGE	\$38.39-
09/03/14	1044ARINDA	ROOM CHARGE	#1044 VANDALEN, MARINDA	Carrie Sail	or. \$115.00
09/03/14	1044 (1)	CITY OCC TAX - 9%	CITY OCC TAX - 9%	ari Alijeya	te: \$10.35
09/04/14	1044	ROOM CHARGE	#1044 VANDALEN, MARINDA	From to	\$115.00
09/04/14		CITY OCC TAX - 9%	CITY OCC TAX - 9%	5 S F 1111	\$10.35
09/05/14	1044	VISA	VISA		(\$642.59)
09/06/14	1044 A	VISA	CV8272 CREDIT	C	\$27.60

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VANDALEN, MARINDA

Room Number: 1042

Daily Rate: 149.00

Room Type: DDNB

No. of Guests: 1/0

us

ARRIVAL	DEPARTU	RE CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT	
09/04/14	09/06/14	XXXXXXXXXXXXX8272	BAR7	BAR7	14501784924	
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT	
09/04/14	1042	ROOM CHARGE	#1042 VANDALEN, MARINDA		\$149.00	
09/04/14	1042	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$13.41	
09/05/14	1042	MORSELS, BAYFRONT TOWER	1042/8977/07:20/MORSELS, BA	YFRONT TOWER	\$3.25	-
09/05/14	1042	GLASS PAVILION RESTAURANT	1042/6769/13:08/GLASS PAVILIO	ON RESTAURAN	\$134.75	خ
09/05/14	1042	TOPSIDER LOUNGE	1042/3452/22:01/TOPSIDER LO	UNGE	\$10.66	~
09/05/14	1042	ROOM CHARGE	#1042 VANDALEN, MARINDA		\$149.00	
09/05/14	1042	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$13.41	
09/06/14	1042	VISA	VISA	4 200	(\$501.31))
09/06/14	1042	ADJ - INDIVIDUAL ROOM CHARGE	ADJ - INDIVIDUAL ROOM CHAI	RGE	(\$59.13)	
09/06/14	1042	ADJ - CITY TAX - 9%	ADJ - CITY TAX - 9%	Herrer T.		1473.48
09/06/14	1042	ADJ - STATE OCC TAX 6.0%	ADJ - STATE OCC TAX 6.0%	TO. W. CHE	(60 EE)	1
09/06/14	1042	VISA	CV8272 CREDIT		\$77.95	1
09/06/14	1042 3	VISA	CV8272 CREDIT	Av talle	\$17.88	l .

OCT 1 6 2014

3.25+ 134.75+ 10.66+ 148.66*

149.00+ 149.00+ 13.41+ 13.41+ 324.82*

TOTAL DUE:

\$0.00

OMNI HOTELS & RESORTS

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Phone: 361-887-1600 • Fax: 361-887-6715

Reservations: 800-843-6664

ESTRADA, LIONEL

TEXAS RIOGRANDE LEGAL AID

300 S. TEXAS BLVD

WESLACO, TX 78520 US

Room Number: 1029

Daily Rate: 115.00

Room Type: DDNB

No. of Guests: 1/0

ARRIVAL	DEPARTU	RE CRÉDIT CARD	RATE PLAN	CATEGORY	ACC	DUNT
09/03/14	09/04/14	XXXXXXXXXXXXXX8272	BAR7	BAR7	14501	784923
DATE	ROOM NO.	DESCRIPTION	REFERENCE			AMOUNT
09/03/14	1029	ROOM CHARGE	#1029 ESTRADA, LIONEL		5.	\$115.00
09/03/14	1029	CITY OCC TAX - 9%	CITY OCC TAX - 9%			\$10.35
09/04/14	1029	VISA	VISA			(\$132.25)
09/04/14	1029	GLASS PAVILION RESTAURANT	1029/6633/07:36/GLASS PA	VILION RESTAURAN		\$18.40 -
09/04/14	1029	LONG DISTANCE	1029/08:22/1/5126803831	1,	14	\$6.47 -
09/04/14	1029	VISA	CV8272		14	(\$24.87)
09/06/14	1029	VISA	CV8272 CREDIT	85.	-	\$6.90
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Lodgins. 10.35+ 125.35* 18.40+ 18.40*

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OCT 1 6 2014

CREDIT DUE: (\$0.00)



OMNI HOTELS & RESORTS corpus christi | texas

900 North Shoreline Blvd. Corpus Christi, TX 78401

Phone: 361-887-1600 • Fax: 361-887-6715

Reservations: 800-843-6664

VANDALEN, MARINDA TEXAS RIOGRANDE LEGAL AID

531 East St. Francis

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Brownsville, TX 78520 US

Room Number: 1452

Daily Rate: 115.00 Room Type: DDNB

No. of Guests: 1/0

ARRIVAL	DĒPARTU	RE CREDIT CARD		RATE PLAN	CATEGORY	ACCOUNT	
09/07/14	09/08/14	xxxxxxxxx	X8272	CBEND	ESP	14501752541	
DATE	ROOM NO.	DESCRIPTION		REFERENCE		AMOUNT	
09/07/14	1452	ROOM CHARGE	13	#1452 VANDALEN, MARIN	DA	\$115.00	
09/07/14	1452	CITY OCC TAX - 9%		CITY OCC TAX - 9%		\$10.35	
09/08/14	1452	VISA		VISA		(\$132.25) \$6.90	n
09/08/14	1452	VISA	= 1	CV8272 CREDIT	171.	\$6.90	15 · 3

115·00+ 10·35+ 125·35*

PA 27)
OCT 1 6 2014

CREDIT DUE:

(\$0.00)



corpus christi | texas

900 North Shoreline Blvd. Corpus Christi, TX 78401

Phone: 361-887-1600 • Fax: 361-887-6715

Reservations: 800-843-6664

VANDALEN, MARINDA

Room Number: 1454

Daily Rate: 115.00

Room Type: DDNB

Room Peper Divill

do. of Sucies, 170

L UM

No. of Guests: 1/0

CALLEGER MARRIED

and King St. Prances

Provincello, TX 7312

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WARRED.

531 East St. Francis Brownsville, TX 78520 US

ARRIVAL	DEPARTU	RE CREDIT CARD	RATE PLAN	CATEGORY	Y ACCOUNT		
09/07/14	09/08/14	XXXXXXXXXXXXX8272	CBEND	ESP	14501783841		
DATE ROOM NO		. DESCRIPTION	REFERENCE		AMOL	JNT	
09/07/14	1454	ROOM CHARGE	#1454 VANDALEN, MARINDA		\$11	5.00	
09/07/14	1454	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$1	0.35	
09/08/14	1454	VISA	VISA	12 %	(\$132	2.25)	
09/08/14	1454	TOPSIDER LOUNGE	1454/3575/15:28/TOPSIDER L	OUNGE	\$4	10.64 -	
09/08/14	1454	VISA	VISA8272	Till 1	(\$40	0.64) -	
09/08/14	1454	VISA	CV8272 CREDIT	1	\$	6.90	

115-00+ 10 - 35+ 125 • 35 *

40.64+ 40.64*

CREDIT DUE: (\$0.00)

OMNI HOTELS & RESORTS

900 North Shoreline Blvd. Corpus Christi, TX 78401

Phone: 361-887-1600 • Fax: 361-887-6715

Reservations: 800-843-6664

VANDALEN, MARINDA COASTAL BEND LAW FIRMS 531 East St. Francis

4

3/

Brownsville, TX 78520 US

Room Number: 1456

Daily Rate: 115.00

Room Type: DDNB

No. of Guests: 1 / 0

ARRIVAL	DEPARTUR	RE CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT
09/07/14	09/08/14	XXXXXXXXXXXXX8272	CBEND	ESP	14501785625
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT
09/07/14	1456	ROOM CHARGE	#1456 VANDALEN, MARINDA		\$115.00
09/07/14	1456	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$10.35
09/08/14	1456	VISA	VISA		\$6.90 \J5.35
09/08/14	1456	VISA	CV8272 CREDIT	82.0	\$6.90

Lods 10.35+
125.35*

OCT 1 6 2014

CREDIT DUE: (\$0.00)

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BEST VALUE INN - RAYMON 450 S. EXPRESSWAY 77 / I-69 RAYMONDVILLE, TX 78580

TOLL FREE RESERVATION # 1-888-315-BEST (2378) PHONE & FAX # 956-689-5900 WWW.americasbvi.com ABVIS-RAYMONDVILLE@HOTMAIL.COM Printed: 9/2/2014 - 8:59pm

MARINDA O VANDALEN Guest #25: 055384

207 E WASHINGTON ST **BROWNSVILLE TX 78520**

Room: 105 2 BED KIC NON SMO

Daily Rate: 59.99 + Tax

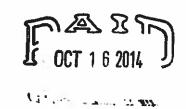
Check-in: 09/02/14 8:59pm Out: 09/03/14 Nights: 1 Guests: 1/0

CHANGE: S0.00

CHARGES					PAYMENT				<u> </u>	
Date	Room	Phone	Misc.	Tax	Total	Credit	Cash	Bill	//otal	Balance
9/2/14	59,99	0.00	0.00	0.60	66.59	66.59	0.00	0.00	// 66.59	0.00
(Taxes - CITY: \$3.00, STATE: \$3.60)							/			
AMOUNT TENDERED: \$0.00										

Check-out time: 11:30am Check-in time: 4:00pm

Guest Signature:



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* Must be completed by the employee and verified and approved by Branch Manager within fifteen (15) working days after expense was incurred. 9019 Jose Garza Name: Office san antonio VIDO7 - ON Destination new orleans File Number Purpose of Trip: attend oral argument at the 5th Cir. Departed from: Office Home Time of Departure: Date 12/4/17 Returned to: Home Office Time of Return: 4:30 PM Date 12/5/17 Personal Automobile Use Miles Driven From: Beginning **Ending** Odometer #'s Date From: To: Beginning Endino Odometer #'s From: To: Beginning Ending Odometer #'s Date From: To: Beginning Ending Odometer #'s Miles are paid at \$0.53 **Total Miles** 0 Total Allowance for Personal Automobile Use \$0.00 Air Fare **Receipts required** DEPARTURE ARRIVAL TIME **FROM** TO DATE TIME DATE 12/4/17 11:45am san antonio new orleans 12/4/17 1:30pm 12/5/17 2:30pm new orleans san antonio 12/5/17 4:30 PM Total Air Fare Expense \$146.96 Did TRLA pay airfare in advance, please place an X in the following YES X Meal Allowance: DATE(S) of Trip 12/04/17 \$45.00 12/05/17 \$45.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total Meal Expenses \$90.00 Lodging Allowance: "*Receipts required" # of Nights Amt Per Day 12/4/17 Night&Tax \$88.60 \$88,60 Night&Tax \$0.00 Total Lodging Expenses \$88.60 Other Expenses: **Receipts required** EXPENSES Date Cost Cab Fare 12-4-17 to hotel, and 12-5-17 to airport, \$36.00 x 2 = 72.00 \$72.00 Car Rental Shuttle Parking airport pkg in San Antonio \$24.00 Tips & Incidentals (Explain) Total of Other Expenses \$96.00 **Grand Total \$** 421.56 Amount Claimed: \$ 421.56 Amount Due Traveler : \$ 421.56 ADVANCE RECEIVED: \$ 0.00 Amount Due TRLA: \$ Advance Check Number: Advanced Airfare: \$ 0.00 I certify that this statement, the attachments and amounts claimed are true, correct, and complete and that payment for the amount claimed has not been received (2-21-17 Date ee Signature Primary Supervisor's Signature Date FOR ACCOUNTING USE ONLY Account No: 7440-39-00-01 Account No: Account No: Account No:

Document 1206-6 Filed on 02/07/20 in TXSD Page 32 of 33 Case 2:13-cv-00193

Telephone # to hote airport CAB COMPANY PASSENGER'S RECEIPT, TAXICAB FARE Amount of Fare... Other Charges...... Driver's Name



ERTETTATETT--12/04/17 10:22 EXIT TIME: 12/05/17 16:34 PARK-DUR.: D:HRS:M 1:26:12 AMOUNT: \$ 24.88 KIND OF PAYMENT: AMEX" XXXXXXXXXXXX300Z 201 VISIT



FOR COMM BEAT IN DISCUSSION OF LAND DATE Melkor a rate of the deficiency: Of NGC GROOM TARRESTAND 61 Oct 451 777

P and by

ASSULU BY AND VALLE UNLY UN SOUTHWEST AIRLINES

Cab Number_

KELEIPI

ISSUED BY AND VALID ONLY ON **SOUTHWEST AIRLINES**

20NOV17 CONFIRMATION NUMBER: SP9LYV A FW : 887 # EXPIRATION DATE: 20NOV18 a CONJUNCTION TICKETS:

TICKET : 5268786465634

Flt Date Dep Acc BC Customer Name MSY 578 **04DEC** 1145A 0105P N GARZA/JOSE **ØSDEC** 0230P 0410P

Base Fare Fees Taxes To 110.29 36.67 146

EF/NONTRANSFERABLE STANDBY REQ UPGRADE TO Y #BG WN

TICKET TOTAL

36.67

146

AX XXXXXXXXXXXX3002 \$146.96 AX XXXXXXXXXXXXX3002 \$146.96

(WANNA GET AW.

FP AX AUTH: 288484 \$146.96 AX AUTH: 288484 \$146.96

Add This Trip To Your Calendar

You're all set.

Add to Calendar

Your card has been charged, and a confirmation email is on its way.

La Quinta Inn & Suites New Orleans Downtown

♥ 301 Camp Street, New Orleans, LA 70130

Guest Name	12	P1	÷	63	Jose Garza
Check-in					Monday, December 4, 2017
Check-out					Tuesday, December 5, 2017

This booking will be 100% refundable if cancelled before 11:59pm local time December 2. After this time, the booking is completely non-refundable and cannot be changed or cancelled.

Your Booking Number	WC7Q3W6
Total Points Earned	76 500 Earned
Posted after check-out	Rapid Rewards® points
Total Paid	
AMEX ending in 3002	\$88.60 JSD
Your	Download Your Receipt (PDF) (/receipt/WC7Q3W6
Receipt	/caf1f75df9ef81d9b21a4f521b9090f5b86ebdbd)

JAN - 5,2018

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